

REQUEST FOR PROTECTIVE CUSTODY

DATE: _____

TIME: _____ AM/PM

☐ Offender Request

☐ Staff Request

Offender's Name	JIRMS #	Housing Assignment

I'm requesting protection for the following reason(s): (Be specific)

I understand that I may be placed in Administrative Segregation temporarily and that I will have a hearing regarding my request.

Offender Signature

Staff/Witness Signature

SHIFT SUPERVISOR REVIEW/COMMENTS

Signature/Title

Date

PROTECTION REVIEW BOARD HEARING

DATE: _____

COMMENTS:

ACTION TAKEN: Return to Quarters: _____ Remain on Protection: _____

Defer: _____ Transfer to: _____

Chairman Signature

Member Signature

Mental Health Signature, if present

Document subsequent 72 hour reviews by Protection Review Board on back of this form.

PROTECTION REVIEW BOARD HEARING

DATE: _____

COMMENTS:

ACTION TAKEN: Return to Quarters: _____ Remain on Protection: _____

Defer: _____ Transfer to: _____

Chairman Signature

Member Signature

Mental Health Signature, if
present

PROTECTION REVIEW BOARD HEARING

DATE: _____

COMMENTS:

ACTION TAKEN: Return to Quarters: _____ Remain on Protection: _____

Defer: _____ Transfer to: _____

Chairman Signature

Member Signature

Mental Health Signature, if
present

PROTECTION REVIEW BOARD HEARING

DATE: _____

COMMENTS:

ACTION TAKEN: Return to Quarters: _____ Remain on Protection: _____

Defer: _____ Transfer to: _____

Chairman Signature

Member Signature

Mental Health Signature, if
present
